



*JRW*

Attorney Docket No. 031794-8

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:	)	Confirmation No. 8291
Mineo Noguchi	)	
Application No. 10/731,083	)	Examiner: LY D PHAM
Filing Date: December 10, 2003	)	Art Unit: 2827
For: SEMICONDUCTOR INTEGRATED	)	
CIRCUIT	)	Date: November 4, 2005

**AMENDMENT**

**MAIL STOP AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated September 9, 2005, please amend the above-identified application as follows:



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/731,083	
	Filing Date	December 10, 2003	
	First Named Inventor	Mineo Noguchi	
	Group Art Unit	2827	
	Examiner Name	PHAM, LY D	
Total Number of Pages in This Submission	5	Attorney Docket Number	031794-8

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John F. Guay Registration No. 47,248 <b>Nixon Peabody LLP</b> 401 9 <sup>th</sup> Street, N.W., Suite 900 Washington, D.C. 20004-2128
Signature	
Date	November 4, 2005

### CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

I hereby certify that this correspondence is being:

- ☐ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop \_\_\_\_\_, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450
- ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at 571-723-8300.

November 4, 2005  
Date

Signature  
Domitria Vieira  
Typed or printed name